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## BIB DATA SHEET

CONFIRMATION NO. 6515

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.	
10/700,292	11/03/2003 RULE	623	3775	5490-000224/US/CPB	
<b>APPLICANTS</b> Phillip M. Gibbs, Winona Lake, IN; <b>** CONTINUING DATA *****</b> OK. AR. 12/14/09 This application is a CIP of 10/201,485 07/23/2002 PAT 7,291,177 which is a CIP of 09/792,174 02/23/2001 PAT 6,458,161 <b>** FOREIGN APPLICATIONS *****</b> None. AR. 12/14/09 <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 02/17/2004					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/ANU RAMANA/</u> Examiner's Signature	<input type="checkbox"/> Met after Allowance <u>Initials</u>	<b>STATE OR COUNTRY</b> IN	<b>SHEETS DRAWINGS</b> 15	<b>TOTAL CLAIMS</b> <del>30</del> 31	<b>INDEPENDENT CLAIMS</b> <del>5</del> 8
<b>ADDRESS</b> HARNESS, DICKEY & PIERCE, P.L.C. P.O. BOX 828 BLOOMFIELD HILLS, MI 48303 UNITED STATES					
<b>TITLE</b> Method and apparatus for acetabular reconstruction					
<b>FILING FEE RECEIVED</b> 1776	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		